

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/197,278	11/20/98	623	3738	S63,2-6739

APPLICANT

BRIAN J. BROWN, HANOVER, MN; MICHAEL DAVIS, SHOREWOOD, MN; DAVID FRIESEN, BROOKLYN PARK, MN; TIMOTHY J. LEY, SHOREVIEW, MN; SEAN P. SKUBIT, SHOREVIEW, MN.

CONTINUING DOMESTIC DATA***

VERIFIED THIS APPLN IS A CIP OF 08/511,076 08/03/95

Fr bility yes, US

371 (NAT'L STAGE) DATA***

VERIFIED

FOREIGN APPLICATIONS***

VERIFIED

FOREIGN FILING LICENSE GRANTED 12/09/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 16	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 2
Verified and Acknowledged: Examiner's Initials	VB Initials				

ADDRESS

JONATHAN GRAD
VIDAS ARRETT & STEINKRAUS
6109 BLUE CIRCLE DRIVE
SUITE 2000
MINNETONKA MN 55343-9131

TITLE

LONGITUDINALLY FLEXIBLE EXPANDABLE STENT

FILING FEE RECEIVED \$1,066	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/197,278	11/20/98	623	3738	S63.2-6769

APPLICANT
BRIAN J. BROWN, HANOVER, MN; MICHAEL DAVIS, SHOREWOOD, MN; DAVID FRIESEN,
BROOKLYN PARK, MN; TIMOTHY J. LEY, SHOREVIEW, MN; SEAN P. SKUBITZ,
SHOREVIEW, MN.

CONTINUING DOMESTIC DATA***

VERIFIED THIS APPLN IS A CIP OF 08/511,076 08/03/95

W

371 (NAT'L STAGE) DATA***

VERIFIED

W

FOREIGN APPLICATIONS***

VERIFIED

W

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/09/98

Foreign Priority claimed 35 USC 119 (e-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 16	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Initials _____	Initials _____				

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FILING FEE RECEIVED \$1,066	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ Credit
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